

PERMIT #

PLAN #

# **TOWN OF EAST HARTFORD – DEPARTMENT OF INSPECTIONS & PERMITS**

## **APPLICATION FOR PLUMBING, HEATING, AIR CONDITIONING, REFRIGERATION, AND SPRINKLER PERMIT**

**CHECK ONE:** ☐ A/C or REFRIG. ☐ SPRINKLER or FIRE SUP. ☐ PLUMBING or PROCESS PIPING ☐ HEATING or VENT/EXHAUST

### **LOCATION OF JOB:**

Street #

Street Name

Apt #

Floor #

Lot/Map #

1. **PROPERTY OWNER:** \_\_\_\_\_
2. **ADDRESS:** \_\_\_\_\_
3. **PHONE #** \_\_\_\_\_ **CELL #** \_\_\_\_\_ **EMAIL** \_\_\_\_\_
4. **APPLICANT:** \_\_\_\_\_
5. **COMPANY NAME:** \_\_\_\_\_
6. **ADDRESS:** \_\_\_\_\_
7. **PHONE #** \_\_\_\_\_ **CELL #** \_\_\_\_\_ **EMAIL** \_\_\_\_\_
8. **LICENSE #** \_\_\_\_\_ **EXPIRATION DATE:** \_\_\_\_\_
9. **NAMES OF SUBCONTRACTORS AND THEIR TRADES:** \_\_\_\_\_
10. **IS THIS A CONTRACT COST?**    ☐ YES                      ☐ NO
11. **BUILDING TYPE :**                      ☐ Residential                      ☐ Commercial
12. **SPECIFY CODE:**                      ☐ IBC                                      ☐ IRC (1- & 2-family only)
13. **VALUE: \$** \_\_\_\_\_ **FEE ENCLOSED: \$** \_\_\_\_\_

<u>Fee Residential</u>	<u>Fee Commercial</u>	<u>Estimated Cost</u>
\$20.00	\$40.00	\$ .00 - \$1,000
\$15.00	\$25.00	each additional \$1,000 or fraction thereof
(Fees include State Education fee of \$0.26/\$1,000 valuation)		

**IMPORTANT!** AFTER COMPLETING ALL PAGES OF APPLICATION, SIGN BELOW, AND MAKE CHECK PAYABLE TO **TOWN OF EAST HARTFORD**, COVERING PROPER AMOUNT OF FEE. (SEE FEE SCHEDULE) BRING PAYMENT, APPLICATION AND PLANS TO: **TOWN OF EAST HARTFORD, DEPARTMENT OF INSPECTIONS AND PERMITS, 740 MAIN STREET, EAST HARTFORD, CONNECTICUT 06108.**

ALL WORK COVERED BY THIS APPLICATION HAS BEEN AUTHORIZED BY THE OWNER OR AGENT OF THIS PROPERTY AND WILL BE DONE IN STRICT ACCORDANCE WITH THE BUILDING CODE.

**\*AS APPLICANT/AGENT I HEREBY CERTIFY, UNDER PENALTY OF LAW FOR FALSE STATEMENT, THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER IN FEE [NOT TENANT] AND THAT I AM AUTHORIZED TO MAKE THIS APPLICATION.**

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\_\_\_\_\_  
**OWNER OF PROPERTY/\* AGENT**  
(SIGNATURE)

**DATE**

\_\_\_\_\_  
**APPLICANT/CONTRACTOR**  
(SIGNATURE)

**DATE**

\*BUILDING DEPARTMENT WITNESS \_\_\_\_\_

**AIR CONDITIONING ::**

DESCRIPTION OF EQUIPMENT  
PACKAGE UNIT      SPLIT SYSTEM      OTHER  
TYPE OF INSTALLATION      TYPE OF REFRIGERANT  
  
REPLACEMENT      TYPE OF CONTROL SYSTEM  
MANUFACTURERS CATALOG DATA, RATING, ETC. YES OR NO

**HEATING**

TYPE OF INSTALLATION      OIL BURNER      GAS BURNER  
FURNACE MAKE AND #  
FILL/VENT SIZE      BTU SQ FT NET  
  
CONVERSION      BASEBOARD SIZE  
HEAT LOSS CALCULATION

**DESCRIPTION, FURTHER DETAIL, OR REMARKS** *(Use separate page for drawing as needed) :*

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**PLUMBING**

KIND OF INSTALLATION      SIZE OF MAIN DRAIN      #BATH TUBS  
#LAVATORIES      # SINKS      # WASH TUBS      # TOILETS      STYLE  
  
# FLOOR      # CATCH  
DRAINS      BASINS

TOILETS VENTILATED      DUCT SIZE

**SPRINKLER**

SPRINKLER      :      FIRE SUPPRESSION      TYPE OF SYSTEM

CONTRACTOR'S WAIVER \_\_\_\_\_ WORKER'S COMP \_\_\_\_\_ HOME OWNER'S WAIVER \_\_\_\_\_

**NOTE:** HOME OWNER ASSUMES FULL RESPONSIBILITY FOR PERMIT, INSPECTION & WORK PERFORMED.

***DEPARTMENT USE ONLY*****DEPARTMENT DECISION** — APPLICATION IS HEREBY:

BUILDING DEPARTMENT:      ☐ **APPROVED**      ☐ **DISAPPROVED**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**CHIEF INSPECTOR**